

50926

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | JB       |        | 05-15-01 |
| O.I.P.E. CLASSIFIER       | u        |        | 6-1-01   |
| FORMALITY REVIEW          | ET       | 976    | 07-09-01 |
| RESPONSE FORMALITY REVIEW | Am       | 981    | 07-07-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 05/15/01 |
| 2        | 06/01/01 |
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| Claim    | Date |
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If more than 150 claims r 10 actions  
 staple additional sheet here

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10-6-01  
 9-7-01